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DATE: Thursday, May 27, 2004

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<i>DB=USPT,EPAB,JPAB,DWPI; PLUR=YES; OP=ADJ</i>			
<input type="checkbox"/>	L7	(L6 or 15) and polyglycerol dioleate	4
<input type="checkbox"/>	L6	polyglyceryl-4-oleate or polyglycerol oleate or oleic acid polyglyceride or decadglyceryl monooleate or polyglycerol monooleate or polyglyceryl oleate or hexaglyceryl oleate or polyglyceryl\$4oleate or triglycerol monooleate	273
<input type="checkbox"/>	L5	polyglycerol oleate or polyglyceryl oleate or polyglycerol monooleate or plurol oleique or oleic acid polyglyceride or Emcol or Demal	838
<input type="checkbox"/>	L4	Gel\$1 Oil\$1SC	0
<input type="checkbox"/>	L3	Gel Oil SC	2
<input type="checkbox"/>	L2	WO-200152822-\$ DID.	1
<input type="checkbox"/>	L1	WO-0152822-\$ DID.	0

END OF SEARCH HISTORY

(FILE 'HOME' ENTERED AT 16:35:33 ON 27 MAY 2004)

FILE 'REGISTRY' ENTERED AT 16:35:40 ON 27 MAY 2004

L1 1 S POLYGLYCEROL OLEATE/CN
L2 1 S POLYGLYCEROL DIOLEATE/CN

FILE 'CAPLUS, BIOSIS, MEDLINE, SCISEARCH, LIFESCI' ENTERED AT 16:38:26 ON
27 MAY 2004

FILE 'REGISTRY' ENTERED AT 16:40:08 ON 27 MAY 2004

L3 SET SMARTSELECT ON
SEL L1 1- CHEM : 19 TERMS
SET SMARTSELECT OFF

FILE 'CAPLUS, BIOSIS, MEDLINE, SCISEARCH, LIFESCI' ENTERED AT 16:40:09 ON
27 MAY 2004

L4 287 S L3

FILE 'REGISTRY' ENTERED AT 16:40:23 ON 27 MAY 2004

L5 SET SMARTSELECT ON
SEL L2 1- CHEM : 4 TERMS
SET SMARTSELECT OFF

FILE 'CAPLUS, BIOSIS, MEDLINE, SCISEARCH, LIFESCI' ENTERED AT 16:40:23 ON
27 MAY 2004

L6 11 S L5
L7 11 S L5
L8 11 S L7 AND L6
L9 3 S L4 AND L6
L10 3 DUP REM L9 (0 DUPLICATES REMOVED)

L1 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2004 ACS on STN
RN 9007-48-1 REGISTRY
CN 1,2,3-Propanetriol, homopolymer, (9Z)-9-octadecenoate (9CI) (CA INDEX
NAME)
OTHER CA INDEX NAMES:
CN 1,2,3-Propanetriol, homopolymer, (Z)-9-octadecenoate
OTHER NAMES:
CN Demal 14
CN DO 13
CN Emcol 12-14-18
CN Emcol 14
CN Estax 50
CN Isolan GO 33
CN Oleic acid polyglyceride
CN Plurol oleique
CN Plurol Oleique CC 497
CN Polyglycerin oleate
CN **Polyglycerol oleate**
CN Polyglyceryl oleate
CN Santone 3-1SH
CN Unigly GO 102S
FS STEREOSEARCH
DR 9009-31-8, 68238-75-5, 75496-64-9, 39403-38-8
MF C18 H34 O2 . x (C3 H8 O3)x
CI COM
PCT Polyether, Polyether formed
LC STN Files: BIOSIS, CA, CAPLUS, CHEMCATS, CHEMLIST, CSCHEM, IFICDB,
IFIPAT, IFIUDB, MSDS-OHS, RTECS*, TOXCENTER, USPAT2, USPATFULL
(*File contains numerically searchable property data)
Other Sources: DSL**, TSCA**
(**Enter CHEMLIST File for up-to-date regulatory information)
DT.CA CAplus document type: Conference; Journal; Patent
RL.P Roles from patents: ANST (Analytical study); BIOL (Biological study);
PREP (Preparation); PROC (Process); PRP (Properties); RACT (Reactant or
reagent); USES (Uses); NORL (No role in record)
RLD.P Roles for non-specific derivatives from patents: PREP (Preparation);
PRP (Properties); USES (Uses)
RL.NP Roles from non-patents: BIOL (Biological study); PROC (Process); PRP
(Properties); USES (Uses); NORL (No role in record)
RLD.NP Roles for non-specific derivatives from non-patents: PREP
(Preparation); USES (Uses)

CM 1

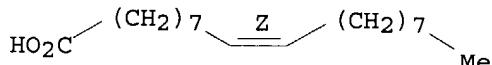
CRN 112-80-1
CMF C18 H34 O2

L2 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2004 ACS on STN
RN 146478-45-7 REGISTRY
CN 1,2,3-Propanetriol, homopolymer, di-(9Z)-9-octadecenoate (9CI) (CA INDEX
NAME)
OTHER CA INDEX NAMES:
CN 1,2,3-Propanetriol, homopolymer, bis[(Z)-9-octadecenoate]
OTHER NAMES:
CN **Polyglycerol dioleate**
CN Polyglyceryl dioleate
FS STEREOSEARCH
DR 403821-11-4
MF C18 H34 O2 . 1/2 (C3 H8 O3)x
PCT Polyether, Polyether formed
SR CA
LC STN Files: CA, CAPLUS, TOXCENTER, USPATFULL
DT.CA CAplus document type: Patent
RL.P Roles from patents: BIOL (Biological study); PREP (Preparation); USES
(Uses)

CM 1

CRN 112-80-1
CMF C18 H34 O2

Double bond geometry as shown.



CM 2

CRN 25618-55-7
CMF (C3 H8 O3)x
CCI PMS

CM 3

CRN 56-81-5
CMF C3 H8 O3

Household Products Database

Capmul G-m-1

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Chemical Information

Chemical Name: Polyglyceryl-4-oleate

CAS Registry Number: 009007-48-1

Synonyms: Polyglycerol oleate; Oleic acid polyglyceride; Decaglyceryl monooleate; Polyglycerol monooleate; Polyglyceryl oleate; Hexaglyceryl oleate; Polyglyceryl-# oleate (where # = 3,6, or 10); Triglyceryl monooleate

Information from other National Library of Medicine databases

Health Studies: ***No information available in HSDB at this time***

Toxicity Information: [Search TOXNET](#)

Chemical Information: [Search ChemIDplus](#)

Products that contain this ingredient

Brand	Category	Form	Percent
Furniture Magic	Home inside	aerosol	<3.0
Panel Magic	Home inside	aerosol	<4.0
Magic American Marble & Granite Magic	Home inside	aerosol	<3.0
Kitchen Magic	Home inside	aerosol	<3.0
Garage Magic	Home maintenance	aerosol	<1.4

Note: Brand names are trademarks of their respective holders.

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Last updated: May 12, 2004



The Registry of Toxic Effects of Chemical Substances

1,2,3 - Propanetriol, homopolymer, (Z) - 9 - octadecenoate

RTECS #: UA0800000

CAS #: 9007-48-1

UPDATE: January 1997

MW: N/R

MF: N/R

NOTE:

- TOXICITY DATA HAVE NOT BEEN EVALUATED. OMISSION OF A SUBSTANCE OR NOTATION DOES NOT IMPLY ANY RELIEF FROM REGULATORY RESPONSIBILITY.

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2. ACUTE TOXICITY DATA:
3. NIOSH DOCUMENTATION AND SURVEILLANCE:
4. STATUS IN FEDERAL AGENCIES:
5. REFERENCES:

SYNONYMS:

1. Polyglycerol oleate	5. Oleic acid polyglyceride
2. Polyglyceryl oleate	6. Emcol 12 - 14 - 18
3. Polyglycerol monooleate	7. Demal 14
4. Plurol oleique	

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triglyceride

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tri·glyc·er·ide [trī glíssə rīd]
(plural tri·clys·er·ides)

noun

natural fat in tissue: a chemical compound (ester) formed from a molecule of the alcohol glycerol and three molecules of fatty acids. Triglycerides constitute many of the fats and oils of animal and vegetable tissues and, like cholesterol, may have an adverse effect on human health in excessive amounts.

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triglyceride

<biochemistry> Storage fats of animal adipose tissue where they are largely glycerol esters of saturated fatty acids.

Also found in the bloodstream with normal blood levels between 10-150 milligrams per decilitre. Elevations of the triglyceride level (particularly in association with elevated cholesterol) have been correlated with the development of atherosclerosis, the underlying cause of heart disease and stroke.

In plants they tend to be esters of unsaturated fatty acids (vegetable oils). Present as a minor component of cell membrane. Important energy supply in heart muscle.

(27 Sep 1997)

Previous: [trigger zone](#), [trigintal](#), [triglucosylalkylacylglycerol sulfotransferase](#)

Next: [trigon](#), [trigona](#), [trigona fibrosa cordis](#), [trigonal](#), [trigone](#)

phospholipid (fos-fō-lip' id)

A lipid containing phosphorus, thus including the lecithins and other phosphatidyl derivatives, sphingomyelin, and plasmalogens; the basic constituents of biomembranes.

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One entry found for **phospholipid**.

Main Entry: **phos·pho·lip·id** 

Pronunciation: *'li-p&d*

Function: *noun*

: any of numerous lipids (as lecithins and phosphatidylethanolamines) in which phosphoric acid as well as a fatty acid is esterified to glycerol and which are found in all living cells and in the bilayers of plasma membranes

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cholesterol (kō-les'ter-ol)

5-Cholesten-3 β -ol (cholestane with a 5,6 double bond and a 3 β -hydroxyl group); the most abundant steroid in animal tissues, especially in bile and gallstones, and present in food, especially food rich in animal fats; circulates in the plasma complexed to proteins of various densities and plays an important role in the pathogenesis of atheroma formation in arteries. See Also: lipoprotein

Prev

lipoprotein (lip-ō-prō'tēn, lī-pō-)

Any complex or compound containing both lipid and protein. Lipoproteins are important constituents of biological membranes and of myelin. Conjugation with protein facilitates transport of lipids, which are hydrophobic, in the aqueous medium of the plasma. Plasma lipoproteins can be separated by ultracentrifugation, electrophoresis, or immunoelectrophoresis; they migrate electrophoretically with α - and β -globulins, but are usually classified according to their densities (flootation constants). The principal classes by density are chylomicrons, which transport dietary cholesterol and triglycerides from the intestine to the liver and other tissues; very low density lipoproteins (VLDL), which transport triglycerides from intestine and liver to muscle and adipose tissue; low density lipoproteins (LDL), which transport cholesterol to tissues other than the liver; and high density lipoproteins (HDL), which transport cholesterol to the liver for excretion in bile. The properties of these and other plasma lipoproteins are set forth in the accompanying table. The protein moiety of a lipoprotein is called an apolipoprotein (or apoprotein). Besides rendering lipids soluble, some apolipoproteins perform biochemical functions such as enzyme activation. The apolipoproteins of plasma lipoproteins are synthesized by the liver and intestinal mucosal cells and vary in molecular weight from 7000 to 500,000. Protein makes up more than 50% of some HDLs but only 1% of chylomicrons. As the proportion of lipid in a lipoprotein increases, its density decreases. A plasma lipoprotein particle is typically spherical, with a hydrophobic core of triacylglycerol, cholesteryl esters, and apolar amino acid residues surrounded by hydrophilic protein structures and phospholipids.

The concentrations of certain serum lipoproteins correlate closely with the risk of atherosclerosis. An HDL cholesterol level below 35 mg/dL (0.90 mmol/L), an LDL cholesterol level above 160 mg/dL (4.15 mmol/L), and a fasting triglyceride level above 250 mg/dL are all independent risk factors for coronary artery disease. Although dietary factors are important in some persons, basal levels of lipoprotein, cholesterol, and triglycerides depend chiefly on heredity. Several phenotypes of familial hyperlipoproteinemia associated with risk of premature cardiovascular disease and death have been identified. SEE hyperlipoproteinemia. Medical management of patients with coronary artery disease (myocardial infarction, angina pectoris, history of coronary artery bypass graft or coronary angioplasty) and other atherosclerotic disorders (peripheral arterial disease, abdominal aortic aneurysm, carotid artery disease) includes detection and correction of hypercholesterolemia and hyperlipoproteinemia. Reducing elevated LDL cholesterol diminishes the risk of coronary artery disease; besides halting the progression of atherosclerosis, it may even shrink established atherosclerotic lesions. Of persons with elevated LDL cholesterol, 75% can achieve normal levels with diet, weight reduction, and exercise; the remainder need drug treatment. Factors besides familial hyperlipoproteinemias that can elevate LDL cholesterol include diabetes mellitus, hypothyroidism, nephrotic syndrome, obstructive liver disease, and drugs (progestogens, anabolic steroids, corticosteroids, thiazide diuretics). Dietary saturated fat raises LDL cholesterol more than any other dietary component, cholesterol itself not excepted.

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